

Disclosure Report Cover

Amendment
☐ Yes ☒ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms.
 Do not use this form to update information.

1. Committee Information	
a. Full Name TRAVIS WILSON FOR COMMISSIONER	c. ID Number 4JM8TP
b. Mailing Address (include City, State and Zip Code) 7925 JAARS RD WAXHAW, NC 28173	d. Date Filed 07/08/2018
	e. Phone Number (828) 776-2774

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JUL 11 2018

Union Co. Board of Elections

2. Report Year 2018	3. Period Start Date (mm/dd/yy) 04/22/2018	4. Period End Date (mm/dd/yy) 06/30/2018	5. Treasurer Full Name JINGER KELLEY
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6. Type of Committee (Check One)		9. Type of Report (check only one type of report from one category)		
<input checked="" type="checkbox"/> Candidate Campaign	<input type="checkbox"/> Party	Municipal	State/County	Referendum
<input type="checkbox"/> Joint Fundraiser	<input type="checkbox"/> PAC	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational	<input type="checkbox"/> Organizational
<input type="checkbox"/> Referendum	<input type="checkbox"/> Legal Expense Fund	<input type="checkbox"/> Thirty-five day	<input type="checkbox"/> Quarterly	<input type="checkbox"/> Pre-referendum
7. Type of Fund (if applicable, check one)		<input type="checkbox"/> Pre-primary	<input type="checkbox"/> First	<input type="checkbox"/> Final
<input type="checkbox"/> "Booster Fund"		<input type="checkbox"/> Pre-election	<input checked="" type="checkbox"/> Second	<input type="checkbox"/> Supplemental Final
<input type="checkbox"/> Building Fund		<input type="checkbox"/> Pre-runoff	<input type="checkbox"/> Third	<input type="checkbox"/> Annual
<input type="checkbox"/> Presidential Election Year Candidates Fund		<input type="checkbox"/> Semi-annual	<input type="checkbox"/> Fourth	<input type="checkbox"/> Special
<input type="checkbox"/> NC Public Campaign Financing Fund		<input type="checkbox"/> Mid Year	<input type="checkbox"/> Semi-annual	
<input type="checkbox"/> Other:		<input type="checkbox"/> Year End	<input type="checkbox"/> Mid Year	
8. Number of Fundraisers this Report		<input type="checkbox"/> Final	<input type="checkbox"/> Year End	10. Special Report Name
0		<input type="checkbox"/> Special	<input type="checkbox"/> Final	
		<input type="checkbox"/> Special	<input type="checkbox"/> Special	

3. Account Information		3. Account Information	
a. Financial Institution Full Name FIRST CITIZENS BANK		a. Financial Institution Full Name	
b. Purpose MAINTAIN CAMPAIGN CONTRIBUTIONS & EXPENDITURES	c. Account Code FCI	b. Purpose	c. Account Code
	d. Period Begin Balance \$ 237.50		d. Period Begin Balance \$

CERTIFICATION

I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22B & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct and that I have been trained by the NC State Board

Jinger L Kelley
 Printed Name of Signor

Jinger L Kelley
 Signature of Appointed Treasurer

07/08/2018
 Date

FOR OFFICE USE ONLY

Date Received: 07/11/18
 Date Postmarked: 07/09/18
 Date Scanned:
 Date Data Entered:

Employee: J. Kelley
 Employee: J. Kelley
 Employee:
 Employee:

Delivery Method

☒ Normal Mail
☐ Registered Mail
☐ Hand Delivered
☐ Electronically Filed

☐ Signer has not received mandatory training

Please Note: This form cannot be used to amend committee information such as the committee address, treasurer, assistant treasurer, custodian of books information, or account information.

You must amend the Statement of Organization (CRO-2100A-E) to make committee changes.

Detailed Summary

Amendment
☐ Yes ☒ No

Use this form to summarize all disclosure reporting forms and to total monetary information

1. Committee Full Name (and Fund if applicable) TRAVIS WILSON FOR COMMISSIONER		2. Type of Report 2018 Second Quarter		3. ID Number 4JM8TP	
Start of Election Cycle: January 1, 2017		Total this Reporting Period		Total this Election Cycle	
4) Cash on Hand at Start		\$ 237.50		\$ 0.00	
RECEIPTS					
5) Aggregated Contributions from Individuals (CRO-1205)		\$ 100.00		\$ 100.00	
6) Contributions from Individuals (CRO-1210)		\$ 900.00		\$ 1,355.94	
7) Contributions from Political Party Committees (CRO-1220)		\$ 0.00		\$ 0.00	
8) Contributions from Other Political Committees (CRO-1230)		\$ 0.00		\$ 0.00	
9) Loan Proceeds (CRO-1410)		\$ 0.00		\$ 100.00	
10) Refunds/Reimbursements to the Committee (CRO-1240)		\$ 0.00		\$ 0.00	
11) Other Receipt Sources					
11a) Interest on Bank Accounts (CRO-1250)		\$ 0.00		\$ 0.00	
11b) Contributions from Not-For-Profit Organizations (CRO-1250)		\$ 0.00		\$ 0.00	
11c) Outside Sources of Income (CRO-1250)		\$ 0.00		\$ 0.00	
11d) Legal Expense Fund - Other Sources (CRO-1270)		\$ 0.00		\$ 0.00	
11e) Exempt Purchase Price Sales (CRO-1265)		\$ 0.00		\$ 0.00	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d and 11e)		\$ 1,000.00		\$ 1,555.94	
EXPENDITURES					
13) Disbursements					
13a) Operating Expenditures (CRO-1310)		\$ 0.00		\$ 300.00	
13b) Contributions to Candidates/Political Committees (CRO-1310)		\$ 250.00		\$ 250.00	
13c) Coordinated Party Expenditures (CRO-1310)		\$ 0.00		\$ 0.00	
14) Aggregated Non-Media Expenditures (CRO-1315)		\$ 52.50		\$ 65.00	
15) Loan Repayments (CRO-1420)		\$ 0.00		\$ 0.00	
16) Refunds/Reimbursements from the Committee (CRO-1320)		\$ 0.00		\$ 0.00	
17) In-Kind Contributions (CRO-1510)		\$ 900.00		\$ 905.94	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 14, 15, 16 and 17)		\$ 1,202.50		\$ 1,520.94	
19) Cash on Hand at End (Add lines 4 and 12 together, then subtract line 18)		\$ 35.00		\$ 35.00	
ADDITIONAL INFORMATION					
20) Non-Monetary Gifts Given to Other Committees (CRO-1330)		\$ 0.00			
21) Outstanding Loans (incl. ones from other campaigns) (CRO-1430)		\$ 100.00			
22) Debts and Obligations owed by the Committee (CRO-1610)		\$ 0.00			
23) Debts and Obligations owed to the Committee (CRO-1620)		\$ 0.00			
24) Account Transfers Within the Committee (CRO-1720)		\$ 0.00			
25) Administrative Support (CRO-1710)		\$ 0.00		\$ 0.00	
26) Forgiven Loans (CRO-1440)		\$ 0.00		\$ 0.00	
27) 48-Hour Notice Reports Sum (CRO-2220)		\$ 0.00		\$ 0.00	
28) Contributions to be Refunded (CRO-1215)		\$ 0.00		\$ 0.00	

CRO-1100

NC State Board of Elections

August 2008

Union Co. Board of Elections

Aggregated Contributions from IndividualsPage 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Optional form used to report NC Contributions From Individuals of \$50 or less

1. Committee Full Name (and Fund if applicable) TRAVIS WILSON FOR COMMISSIONER					2. ID Number 4JM8TP	
3. Contributor Information						
a. Amend	b. Account Code	c. Form of Payment	d. In-Kind Description	e. Date (mm/dd/yyyy)	f. Amount	
<input type="checkbox"/> Add	FCI	Cash		04/30/2018	\$ 50.00	
<input type="checkbox"/> Remove						
<input type="checkbox"/> Add	FCI	Cash		04/30/2018	\$ 50.00	
<input type="checkbox"/> Remove						
4. Total only this Page					\$ 100.00	
5. Total of ALL CRO-1205 Pages (This line must be on line 5 of Detailed Summary Page CRO-1100)					\$ 100.00	

CRO-1205

NC State Board of Elections

April 2007

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Union Co. Board of Elections

Contributions from IndividualsPg 1 of 1

Amendment

☐ Yes ☒ No

Use this form to report individual contributions over \$50 or contributions under \$50 if form CRO 1205 is not used

1. Committee Full Name (and Fund if applicable)				2. ID Number	
TRAVIS WILSON FOR COMMISSIONER				4JM8TP	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (Include city, state, & zip)			b. Job Title/Profession		d. Comments
JINGER KELLEY 3103 JULIAN GLEN CR WAXHAW, NC 28173			BOOKKEEPER		
			c. Employer's Name/Specific Field		
			SELF		
					e. Election Sum to Date
					\$ 900.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Description	j. Date (mm/dd/yyyy)	k. Amount
<input type="checkbox"/>	FCI	In-Kind	CAMPAIGN REPORTING & REVIEW	06/30/2018	\$ 900.00
<input type="checkbox"/>					\$
<input type="checkbox"/>					\$
4. Total only this Page					\$ 900.00
5. Total of ALL CRO-1210 Pages (This line must be on line 6 of Detailed Summary Page CRO-1100)					\$ 900.00

CRO-1210

NC State Board of Elections

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Union Co. Board of Elections

Disbursements

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Amendment

☐ Yes ☒ No

Use this form to report expenditures from the committee for operating expenses, contributions to candidate/political committees and coordinated party expenditures

1. Committee Full Name (and Fund if applicable)				2. ID Number	
TRAVIS WILSON FOR COMMISSIONER				4JM8TP	
3. Type of Disbursement <i>(Please use separate CRO-1310 forms for each type of Disbursement.)</i>					
<input type="checkbox"/> Operating Expenses <input checked="" type="checkbox"/> Contributions to Candidates/Political Committees <input type="checkbox"/> Coordinated Party Expenditures					
4. Payee Information <input type="checkbox"/> Add <input type="checkbox"/> Remove					
a. Full Name, Mailing Address & Phone (include city, state, & zip) BEN CLINE FOR CONGRESS PO BOX 817 LEXINGTON, VA 24450			b. Coordinated Committee Name		d. Comments
			c. Level Registered (Specify)		
			<input checked="" type="checkbox"/> Federal <input type="checkbox"/> County: <input type="checkbox"/> State <input type="checkbox"/> Municipality:		
					e. Election Sum to Date
					\$ 250.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
FCI	Debit Card	D	05/11/2018	\$ 250.00	
				\$	
5. Total only this Page					\$ 250.00
6. Total of ALL CRO-1310 Pages					
<i>(This line goes in line 13a of Detailed Summary Page CRO-1100 if Operating Expenses)</i> <i>(This line goes in line 13b of Detailed Summary Page CRO-1100 if Contrib to Candidates/Political Comm)</i> <i>(This line goes in line 13c of Detailed Summary Page CRO-1100 if Coordinated Party Expenditures)</i>					\$ 250.00
7. Purpose Codes (List detailed expenditure code in (h.) above)					
A* - Media		B* - Printing		C* - Fundraising	
E - Salaries		F* - Equipment		G - Political Party	
I - Postage		J - Penalties		K* - Office Expenses	
O* Other				D - To Another Candidate	
				H* - Holding Public Office Expenses	
				Q* - Donation to Legal Expense Fund	
* Codes require detailed explanation in required remarks field (k)					

CRO-1310

NC State Board of Elections

December 2009

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Union Co. Board of Elections

Aggregated Non-Media ExpendituresPage 1 of 1**Amendment**☐ Yes ☒ No

Optional form used to report NC Non-Media Expenditures of \$50 or less.

1. Committee Full Name (and Fund if applicable)					2. ID Number	
TRAVIS WILSON FOR COMMISSIONER					4JM8TP	
3. Payee Information						
a. Amend	b. Account Code	c. Form of Payment	d. Purpose Code	e. Date (mm/dd/yyyy)	f. Amount	g. Required Remarks
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FCI	Draft	O	04/30/2018	\$ 7.50	BANK FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FCI	Draft	O	05/31/2018	\$ 7.50	BANK FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FCI	Draft	O	06/29/2018	\$ 7.50	BANK FEES
<input type="checkbox"/> Add <input type="checkbox"/> Remove	FCI	Cash	O	05/10/2018	\$ 30.00	POLL WORKER
4. Total only this Page					\$ 52.50	
5. Total of ALL CRO-1315 Pages <i>(This line must be on line 14 of Detailed Summary Page CRO-1100)</i>					\$ 52.50	
6. Purpose Codes (List detailed expenditure code in (d) above)						
B* - Printing		C* - Fundraising		D - To Another Candidate		
E - Salaries		F* - Equipment		H* - Holding Public Office Expenses		
I - Postage		J - Penalties		K* - Office Expenses		
O* - Other				Q* - Donations to Legal Expense Fund		
* Codes require detailed explanation in required remarks field (g)						

CRO-1315

NC State Board of Elections

December 2009

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Union Co. Board of Elections

In-Kind ContributionsPg 1 of 1

Amendment	
<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No

Use this form to report non-monetary contributions, donations, goods or services provided to the committee or fund.

Use CRO-1215 if In-Kind Contributions were or will be refunded within 7 days.

1. Committee Full Name (and Fund if applicable)		2. ID Number	
TRAVIS WILSON FOR COMMISSIONER		4JM8TP	
3. Contributor Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip)		b. Type of Contributor	
JINGER KELLEY 3103 JULIAN GLEN CR WAXHAW, NC 28173		<input checked="" type="checkbox"/> Individual	
		<input type="checkbox"/> Candidate	
		<input type="checkbox"/> Party	
		<input type="checkbox"/> PAC	
		<input type="checkbox"/> Referendum	
		<input type="checkbox"/> Other Receipt Source	
		c. Comments	
		d. Election Sum to Date	
		\$ 900.00	
e. Description		f. Date (mm/dd/yyyy)	g. Fair Market Amount
CAMPAIGN REPORTING & REVIEW		06/30/2018	\$ 900.00
			\$
			\$
4. Total only this Page		\$ 900.00	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)		\$ 900.00	

CRO-1510

NC State Board of Elections

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Union Co. Board of Elections

Outstanding Loans

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☐ Yes ☒ No

Use this form to report any outstanding loans received during a previous reporting period and until the loan is paid in full.

1. Committee Full Name (and Fund if applicable) TRAVIS WILSON FOR COMMISSIONER		2. ID Number 4JM8TP	
3. Lender Information <input type="checkbox"/> Add <input type="checkbox"/> Remove			
a. Full Name, Mailing Address & Phone (include city, state, & zip) TRAVIS WILSON 7925 JAARS RD WAXHAW, NC 28173		b. Job Title/Profession JANITOR	d. Comments
		c. Employer's Name/Specific Field JAARS	e. Start Date (mm/dd/yyyy) 02/02/2018
			f. End Date (mm/dd/yyyy)
g. Rate %	h. Security Pledged OPENED ACCOUNT	i. Original Loan Amount \$ 100.00	j. Remaining Loan Balance \$ 100.00
k. Full Name of Lending Institution			l. Loan Number
4. Total only this Page			\$ 100.00
5. Total of ALL CRO-1430 Pages (This line must be on line 21 of Detailed Summary Page CRO-1100)			\$ 100.00

CRO-1430

NC State Board of Elections

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